



***California Coordinated Care Initiative:***  
**An Opportunity to Improve Access and Services for  
Persons with Dementia and their Family Caregivers**

**CALIFORNIA DEPARTMENT OF AGING**

# Grant Overview

- In June 2013, the federal Administration on Community Living (ACL) released a competitive funding opportunity for states focused on “creating a sustainable home and community based services system that meets the unique needs of persons with dementia and their family caregivers.”
- Three year grant period (9/2013-9/2016)
- Maximum funding =\$820,000 (reduced to \$744,000)

## Grant Overview cont.

- In 2013, the CA Department of Aging, in partnership with the Alzheimer's Association, and the CA Dept. of Health Services submitted a proposal.
- Was one of five states selected.
- Grant structure:
  - 6-month planning period (limited funding available)
  - After ACL approval of implementation plan, full funding available
  - 30 month implementation period

## CA Proposal—Cal MediConnect Focus

- 8 California counties will be participating in the CA Coordinated Care Initiative.
- Cal MediConnect Health Plans that combine all Medicare and Medi-Cal benefits and services into a single program will be offered to Dual Eligibles in those counties.
- Health Plans must have a system of care with care managers to assist individuals in obtaining the care they need (acute, primary, behavioral health and long term services and supports).
- Three-way contact requires Plans to have Dementia Care Specialist

# Estimated Dementia Population

CCI Counties	Passive Enrollment in CAMediConnect	% of Beneficiaries being treated for Alzh	# of Plan Members Being Treated for Dementia			
Alameda	25,502	13.000%	3,315			
Los Angeles*	200,000	13.000%	26,000			
Orange	39,969	13.000%	5,196			
Riverside	24,395	13.000%	3,171			
San Bernardino	26,977	13.000%	3,507			
San Diego	41,710	13.000%	5,422			
San Mateo	3,701	13.000%	481			
Santa Clara	<u>32,986</u>	<u>13.000%</u>	<u>4,288</u>			
Total	395,204	13.000%	51,377			
*LA reflects cap on enrollment						
Source: CA DHCS RASB, "Medi-Cal's Coordinated Care Initiative Population Combined Medicare & Medi-Cal Costs, Utilization & Disease Burden, Nov 2012						
Source: CA DHCS RASB, Medi-Cal Statistical Brief Nov 2013 Table 3 CCI Population in the Eight Pilot Counties						

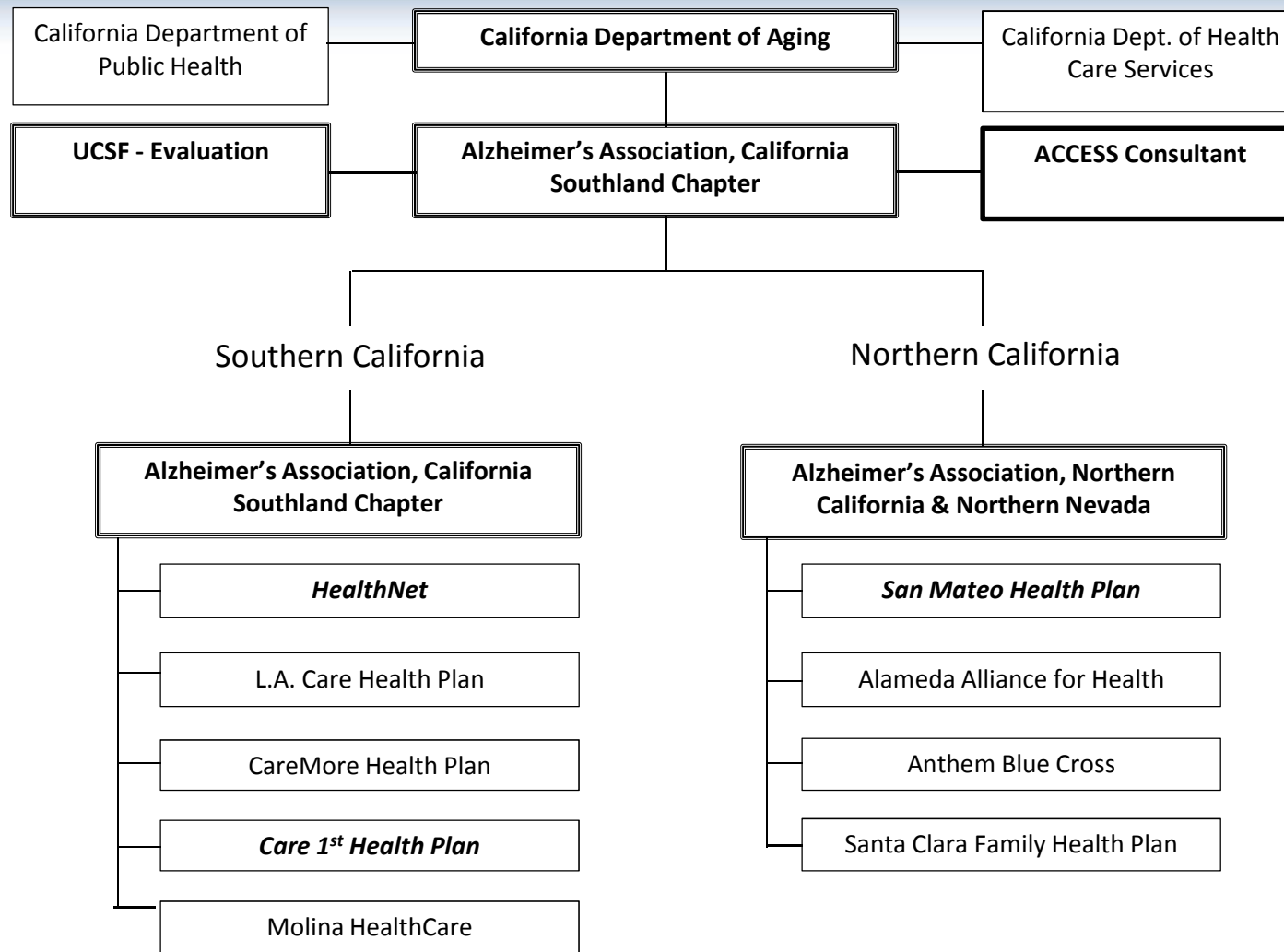
# Need for Care Manager Dementia Expertise

- About 13% of individuals who will be passively enrolled in Cal MediConnect will have been diagnosed with Alzheimer's disease or a related dementia
- An additional 13% likely have undiagnosed dementia
- Per capita health care costs for those with Alzheimer's & related dementias rank in the Top 5
- Complex care needs, social supports & high risk for institutionalization

# Grant Model

- Focus on health plan care managers who have the most direct contact with the individuals and their families
- Alzheimer's Association--Northern California and Southland Chapters—will work with selected CCI Health Plans to develop Care Manager training & support strategies
- Phased in approach

# Grant Structure





# Care Management Training



- Adopting existing evidence based dementia care training model (ACCESS)
- Working with Plans in terms of training format
- Seek to have ongoing relationship with Plan Dementia Specialist
- Will be making training available on-line in future to address new care manager hiring/reassignment/refreshers.

# Grant Performance Measure

- 100 Care Managers trained
  - ❖ Year 1= 20
  - ❖ Year 2= 40
  - ❖ Year 3= 40

# Caregiver Support

- Will work with care managers to identify family caregivers that could benefit from evidence-based (or derived) dementia education and support programs
- The participating Alzheimer's Association chapters will provide these programs
- Performance goal: 200 participants
  - ❖ Year 1 = 50 participants
  - ❖ Year 2 = 75 participants
  - ❖ Year 3 = 75 participants

# Grant Evaluation

Qualitative and quantitative measures  
In Three Key Areas:

- ❖ System of Care
- ❖ Care Manager
- ❖ Family Caregiver

# System of Care Measures

- Modifications made to expand/improve screening for cognitive impairments in
  - Health Risk Assessment
  - Annual Wellness Visit
  - Care Management Practice
- If new dementia screening elements were added, were they useful?
- Are more individuals who are seeing by trained care managers being treated with dementia medications?

## Systems of Care Measures, cont.

- Is there at least one well-trained, dementia care manager serving as an internal Plan resource?
- Are more individuals/families impacted by dementia being referred to home and community based services (HCBS), including the Alzheimer's Association support programs?

# Care Manager Measures

- Satisfaction with training and materials
- Increased knowledge about dementia and home and community-based services
- Increased satisfaction with their ability to coordinate the care for persons with dementia (CM self-efficacy)
- Increased number of referrals to HCBS providers, including the Alzheimer's Association

# Family Caregiver Measures

- Satisfaction with training and/or services
- Increased knowledge about dementia and HCBS resources
- Increased caregiver self-efficacy